

Fill in this information to identify your case:

Debtor 1 Thomas Dean Ledbetter
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Oklahoma

Case number 24-80729
(if known)

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.1	Ally Financial	Last 4 digits of account number <u>9 5 0 0</u>	\$1,861.00
Nonpriority Creditor's Name <u>P.O. Box 380901</u>		When was the debt incurred? <u>2023</u>	
Number _____ Street _____		As of the date you file, the claim is: Check all that apply.	
<u>Minneapolis, MN 55438</u>		<input type="checkbox"/> Contingent	
City _____ State _____ ZIP Code _____		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:	
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Part 2: **Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.2	American Express	Last 4 digits of account number	<u>1</u> <u>0</u> <u>0</u> <u>4</u>	\$4,201.00
Nonpriority Creditor's Name		When was the debt incurred?		
Po Box 650448		<u>2023</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
Dallas, TX 75265-0448		<input type="checkbox"/> Contingent		
City State ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

4.3	American Express	Last 4 digits of account number	<u>1</u> <u>0</u> <u>0</u> <u>3</u>	\$3,429.00
Nonpriority Creditor's Name		When was the debt incurred?		
Po Box 6031		<u>2023</u>		
Number Street		As of the date you file, the claim is: Check all that apply.		
Carol Stream, IL 60197-6031		<input type="checkbox"/> Contingent		
City State ZIP Code		<input type="checkbox"/> Unliquidated		
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed		
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1

Thomas**Dean****Ledbetter**Case number (if known) **24-80729**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4	Arvest Credit Card	Last 4 digits of account number 8 0 0 2	\$2,299.00
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Nonpriority Creditor's Name

Po Box 6139

Number

Street

Norman, OK 73070-6139

City

State

ZIP Code

When was the debt incurred?

2023

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify _____

Is the claim subject to offset?

☒ No☐ Yes

4.5	Capital One	Last 4 digits of account number 2 7 3 9	\$3,534.00
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Nonpriority Creditor's Name

Po Box 31293

Number

Street

Salt Lake Cty, UT 84131-0293

City

State

ZIP Code

When was the debt incurred?

2023

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Credit Card**

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Thomas**Dean****Ledbetter**Case number (if known) **24-80729**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.6	Merrick Bank Nonpriority Creditor's Name Po Box 9201 Number Street Old Bethpage, NY 11804-9001 City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? <u>2/2/24</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	\$48.00
<p>Who incurred the debt? Check one.</p> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p>Is the claim subject to offset?</p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.7	National Debt Relief Nonpriority Creditor's Name Po Box 2011 Number Street New York, NY 10272-2011 City State ZIP Code	Last 4 digits of account number _____ When was the debt incurred? <u>2023</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Account</u>	\$1,000.00
<p>Who incurred the debt? Check one.</p> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
<p>Is the claim subject to offset?</p> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Thomas**Dean****Ledbetter**Case number (if known) **24-80729**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.8	Puroclean of Broken Arrow	Last 4 digits of account number	\$98,691.71
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Nonpriority Creditor's Name

10718 S. Lynn Lane

Number Street

Broken Arrow, OK 74011

City State ZIP Code

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other, Specify _____

Is the claim subject to offset?

- ☒ No
☐ Yes

4.9	Zwicker & Associates	Last 4 digits of account number	\$2,822.00
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Nonpriority Creditor's Name

400 W Capitol Ave Ste 1700

Number Street

Little Rock, AR 72201-3438

City State ZIP Code

When was the debt incurred?

2023

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other, Specify **Collection Agency**

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

1.**Camille Edmison**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name

Line **4.3** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims**400 Wes Capitol Ave, Ste 1700**

Number Street

Last 4 digits of account number _ _ _ _

Little Rock, AR 72201

City

State

ZIP Code

2.**James Hoover**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name

Line **4.8** of (Check one):☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims**10718 S. Lynn Lane**

Number Street

Last 4 digits of account number _ _ _ _

Broken Arrow, OK 74011

City

State

ZIP Code

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	<u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b.	<u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	<u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +	<u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6e.	<u>\$0.00</u>
		Total claim	
Total claims from Part 2	6f. Student loans	6f.	<u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	<u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	<u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	<u>\$117,885.71</u>
	6j. Total. Add lines 6f through 6i.	6j.	<u>\$117,885.71</u>

Fill in this information to identify your case:

Debtor 1	<u>Thomas</u>	<u>Dean</u>	<u>Ledbetter</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Oklahoma</u>		
Case number (if known)	<u>24-80729</u>		

☒ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	<u>\$245,000.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	<u>\$61,327.00</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	<u>\$306,327.00</u>

Your assets

Value of what you own

Part 2: Summarize Your Liabilities

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	<u>\$140,271.00</u>
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3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	<u>\$0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	<u>+</u> <u>\$117,885.71</u>

Your total liabilities

\$258,156.71

Your liabilities

Amount you owe

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	<u>\$3,678.86</u>
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5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	<u>\$3,503.60</u>
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Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$1,538.56

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)	<u> \$0.00 </u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u> \$0.00 </u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u> \$0.00 </u>
9d. Student loans. (Copy line 6f.)	<u> \$0.00 </u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u> \$0.00 </u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ <u> \$0.00 </u>
9g. Total. Add lines 9a through 9f.	<u> \$0.00 </u>

Fill in this information to identify your case:

Debtor 1	<u>Thomas</u>	<u>Dean</u>	<u>Ledbetter</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Oklahoma</u>		
Case number (if known)	<u>24-80729</u>		

☒ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Thomas Dean Ledbetter
Thomas Dean Ledbetter, Debtor 1

Date 10/02/2024
MM/ DD/ YYYY

IN THE UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF OKLAHOMA
OKMULGEE DIVISION

IN RE: **Ledbetter, Thomas Dean**

CASE NO 24-80729

CHAPTER 7

AMENDED

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 10/02/2024

Signature /s/ Thomas Dean Ledbetter
Thomas Dean Ledbetter, Debtor

James Hoover
10718 S. Lynn Lane
Broken Arrow, OK 74011

Puroclean of Broken Arrow
10718 S. Lynn Lane
Broken Arrow, OK 74011